



## Complete Summary

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### TITLE

Colorectal cancer screening: percentage of patients age 50 and older who are up-to-date with colorectal cancer screening.

### SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Colorectal cancer screening. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2008 Jun. 27 p. [57 references]

## Measure Domain

### PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

### SECONDARY MEASURE DOMAIN

Does not apply to this measure

## Brief Abstract

### DESCRIPTION

This measure is used to assess the percentage of patients age 50 and older who are up-to-date with colorectal cancer screening.

### RATIONALE

The priority aim addressed by this measure is to increase the percentage of patients age 50 and older who are up-to-date with colorectal screening.

### PRIMARY CLINICAL COMPONENT

Colorectal cancer screening; guaiac-based fecal occult blood test; fecal immunochemical test; flexible sigmoidoscopy; colonoscopy; computed tomographic (CT) colonography; double-contrast barium enema (DCBE)

## DENOMINATOR DESCRIPTION

Number of patients age 50 and older who had an encounter with the medical group in the past month

## NUMERATOR DESCRIPTION

Number of patients in the denominator who were up to date with colorectal cancer screening at the time of their last visit (see the related "Numerator Inclusions/Exclusions" field in the Complete Summary)

### Evidence Supporting the Measure

## EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

## NATIONAL GUIDELINE CLEARINGHOUSE LINK

- [Colorectal cancer screening.](#)

### Evidence Supporting Need for the Measure

## NEED FOR THE MEASURE

Unspecified

### State of Use of the Measure

## STATE OF USE

Current routine use

## CURRENT USE

Internal quality improvement

### Application of Measure in its Current Use

## CARE SETTING

Physician Group Practices/Clinics

## PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians

**LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED**

Group Clinical Practices

**TARGET POPULATION AGE**

Age greater than or equal to 50 years

**TARGET POPULATION GENDER**

Either male or female

**STRATIFICATION BY VULNERABLE POPULATIONS**

Unspecified

**Characteristics of the Primary Clinical Component****INCIDENCE/PREVALENCE**

Unspecified

**ASSOCIATION WITH VULNERABLE POPULATIONS**

Unspecified

**BURDEN OF ILLNESS**

Unspecified

**UTILIZATION**

Unspecified

**COSTS**

Unspecified

**Institute of Medicine National Healthcare Quality Report Categories****IOM CARE NEED**

Staying Healthy

**IOM DOMAIN**

Effectiveness

## **CASE FINDING**

Users of care only

## **DESCRIPTION OF CASE FINDING**

Patients age 50 and older

A random sample of at least 10 patient medical records per month. The status of the individuals is most likely collected with chart abstract data. However, an individual's status may be collected with administrative data and augmented with chart abstraction.

A lack of data on an individual is interpreted as not up-to-date and is not counted in the numerator, but is included in the denominator.

## **DENOMINATOR SAMPLING FRAME**

Patients associated with provider

## **DENOMINATOR INCLUSIONS/EXCLUSIONS**

### **Inclusions**

Number of patients age 50 and older who had an encounter in the past month

### **Exclusions**

Unspecified

## **RELATIONSHIP OF DENOMINATOR TO NUMERATOR**

All cases in the denominator are equally eligible to appear in the numerator

## **DENOMINATOR (INDEX) EVENT**

Encounter

## **DENOMINATOR TIME WINDOW**

Time window is a single point in time

## **NUMERATOR INCLUSIONS/EXCLUSIONS**

### **Inclusions**

Number of patients in the denominator who were up to date with colorectal cancer screening at the time of their last visit\*

\*Patients in the denominator, having one or more of the following screenings:

- Occult blood test yearly
  - Annual guaiac-based fecal occult blood test with high test sensitivity for cancer, or
  - Annual fecal immunochemical test with high test sensitivity for cancer
- Flexible sigmoidoscopy every five years
- Double-contrast barium enema (DCBE) every five years
- Computed tomographic colonography every five years
- Colonoscopy every 10 years

### **Exclusions**

Unspecified

## **MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS**

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

## **NUMERATOR TIME WINDOW**

Fixed time period

## **DATA SOURCE**

Administrative data  
Medical record

## **LEVEL OF DETERMINATION OF QUALITY**

Individual Case

## **PRE-EXISTING INSTRUMENT USED**

Unspecified

## **Computation of the Measure**

## **SCORING**

Rate

## **INTERPRETATION OF SCORE**

Better quality is associated with a higher score

## **ALLOWANCE FOR PATIENT FACTORS**

Unspecified

## **STANDARD OF COMPARISON**

Internal time comparison

## Evaluation of Measure Properties

### EXTENT OF MEASURE TESTING

Unspecified

## Identifying Information

### ORIGINAL TITLE

Percentage of patients age 50 and older who are up to date with colorectal cancer screening.

### MEASURE COLLECTION

[Colorectal Cancer Screening Measures](#)

### DEVELOPER

Institute for Clinical Systems Improvement

### ADAPTATION

Measure was not adapted from another source.

### RELEASE DATE

2003 Jul

### REVISION DATE

2008 Jun

### MEASURE STATUS

This is the current release of the measure.

This measure updates a previous version: Institute for Clinical Systems Improvement (ICSI). Colorectal cancer screening. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2006 Jun. 50 p.

### SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Colorectal cancer screening. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2008 Jun. 27 p. [57 references]

## **MEASURE AVAILABILITY**

The individual measure, "Percentage of Patients Age 50 and Older Who Are Up to Date with Colorectal Cancer Screening," is published in "Health Care Guideline: Colorectal Cancer Screening." This document is available from the [Institute for Clinical Systems Improvement \(ICSI\) Web site](#).

For more information, contact ICSI at, 8009 34th Avenue South, Suite 1200, Bloomington, MN 55425; phone: 952-814-7060; fax: 952-858-9675; Web site: [www.icsi.org](http://www.icsi.org); e-mail: [icsi.info@icsi.org](mailto:icsi.info@icsi.org).

## **NQMC STATUS**

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